Case 17-26461 Doc 1 Filed 09/01/17 Entered 09/01/17 14:54:33 Desc Main

Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District Of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself
rait li	identily	i oui seii

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1. Your full name				
Write the name that is on your government-issued picture identification (for example, your driver's license or	Oscar First name V.	First name		
passport).	Middle name	Middle name		
Bring your picture identification to your meeting with the trustee.	Sibri Last name	Last name		
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
All other names you have used in the last 8				
years	First name	First name		
Include your married or maiden names.	Middle name	Middle name		
	Last name	Last name		
	First name	First name		
	Middle name	Middle name		
	Last name	Last name		
3. Only the last 4 digits of your Social Security number or federal	xxx - xx - <u>5</u> <u>9</u> <u>7</u> <u>0</u>	xxx - xx		
Individual Taxpayer Identification number (ITIN)	OR 9 xx - xx	OR 9 xx - xx		

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 Debtor 1
 Oscar V. Sibri | First Name
 Last Name
 Case number (if known) | Case number (if known) |

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.		
	the last 8 years	Business name	Business name		
	Include trade names and doing business as names	Business name	Business name		
		EIN	EIN		
		EIN	EIN — — — — — — — —		
5.	Where you live		If Debtor 2 lives at a different address:		
		A644 North Monticello Avenue Number Street	Number Street		
		Chicago IL 60625 City State ZIP Code	City State ZIP Code		
		COOK County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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 Debtor 1
 Oscar V. Sibri | First Name
 Case number (if known) | Middle Name

Pa	Tell the Court Abou	t Your B	ankrup	tcy Case			
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7					
	are choosing to file under						
	under	☐ Chap	oter 11				
		☐ Chap	oter 12				
8.	How you will pay the fee	local your: subn	court fo self, you nitting y	or more details about ho u may pay with cash, ca	ow you mashier's c	nay pay. Typicall heck, or money	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check
							ents (Official Form 103A).
		☐ I req By la less pay t	uest th w, a jud than 15 the fee i	at my fee be waived (\)dge may, but is not requive.	You may uired to, v ty line tha choose th	request this opt waive your fee, a at applies to you iis option, you m	ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the
9.	Have you filed for	⊠ No					
	bankruptcy within the last 8 years?		District		When		Case number
	last o years:					MM / DD / YYYY	
			District		When	MM / DD / YYYY	Case number
			District		When		Case number
						MM / DD / YYYY	
10.	Are any bankruptcy	⊠ No					
	cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known
			Debtor				Relationship to you
			District		When		Case number, if known
						MM / DD / YYYY	
11.	Do you rent your residence?	No. Yes.	Go to li Has you	ur landlord obtained an evi	iction judg	ment against you	and do you want to stay in your
				Go to line 12.			
				s. Fill out <i>Initial Statement i</i> bankruptcy petition.	About an	Eviction Judgment	t Against You (Form 101A) and file it with

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 Debtor 1
 Oscar V. Sibri | First Name
 Case number (if known) | Middle Name

	X No.	Go to Part 4.			
of any full- or part-time business?	☐ Yes	Name and location of bu	siness		
A sole proprietorship is a					
business you operate as an individual, and is not a separate legal entity such as		Name of business, if any			
a corporation, partnership, or LLC.		Number Street			
If you have more than one					
sole proprietorship, use a separate sheet and attach it					
to this petition.		City		State	ZIP Code
		Check the appropriate b	ox to describe your busines.	s:	
		☐ Health Care Busines	ss (as defined in 11 U.S.C. §	101(27A))	
		☐ Single Asset Real Es	state (as defined in 11 U.S.C	C. § 101(51B))
		☐ Stockbroker (as defin	ned in 11 U.S.C. § 101(53A)))	
		☐ Commodity Broker (a	as defined in 11 U.S.C. § 10	1(6))	
		☐ None of the above			
business debtor, see 11 U.S.C. § 101(51D).	☐ Yes	the Bankruptcy Code. I am filing under Chapter Bankruptcy Code.	r 11 and I am a small busine	ess debtor acc	or according to the definition in cording to the definition in the
Report if You Own	or Have	Any Hazardous Prop	erty or Any Property T	nat Needs I	Immediate Attention
Do you own or have any property that poses or is	⊠ No				
property that poses or is alleged to pose a threat		. What is the hazard?			
property that poses or is		. What is the hazard?			
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?		. What is the hazard?			
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any					
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?			s needed, why is it needed?		
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building			s needed, why is it needed?	·	
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock				·	
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention is			
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention is			
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention is			

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Oscar V. Sibri Debtor 1 Case number (if known) Middle Name Last Name First Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

☐ Disability.

15. Tell the court whether you have received briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
You must check one:	You must check one:
I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.	☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
☐ I am not required to receive a briefing about credit counseling because of:	☐ I am not required to receive a briefing about credit counseling because of:
Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

not required to receive a briefing about it counseling because of: ncapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

My physical disability causes me

to be unable to participate in a

briefing in person, by phone, or

duty in a military combat zone.

reasonably tried to do so.

☐ Active duty. I am currently on active military

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

through the internet, even after I

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Debtor 1

 Oscar V. Sibri
 Case number (# known)

 First Name
 Middle Name
 Last Name

Pa	Tt 6: Answer These Ques	stions for Reporting Purposes	S			
16. What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
	you have i	No. Go to line 16b.✓ Yes. Go to line 17.				
			y business debts? Business debt stment or through the operation of th	ts are debts that you incurred to obtain ne business or investment.		
		□ No. Go to line 16c.□ Yes. Go to line 17.				
		16c. State the type of debts you o	we that are not consumer debts or b	usiness debts.		
17.	Are you filing under Chapter 7?	☑ No. I am not filing under Chap	pter 7. Go to line 18.	THE CONTROL OF THE CO		
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter administrative expenses and No	7. Do you estimate that after any exa are paid that funds will be available t	empt property is excluded and o distribute to unsecured creditors?		
18.	How many creditors do you estimate that you owe?	▲ 1-49➡ 50-99➡ 100-199➡ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to be worth?	★ \$0-\$50,000★ \$50,001-\$100,000★ \$100,001-\$500,000★ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	How much do you estimate your liabilities to be?	★ \$0-\$50,000★ \$50,001-\$100,000★ \$100,001-\$500,000★ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	rt 7: Sign Below					
Fo	r you	I have examined this petition, and correct.	I declare under penalty of perjury that	at the information provided is true and		
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
			e who is not an attorney to help me fill out .C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		I understand making a false statement, concealing property, or obtaining money or property by fraud in cowith a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 182, 1341, 1519, and 3571.				
		X Significance of Dobby 1	Signati	ure of Debtor 2		
		Signature of Beator 1				
		Executed on	Execut	ed on		

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Debtor 1 Oscar V. Sibri First Name Middle N	ame Last Name	Case number (# known)				
For your attorney, if you are represented by one	available under each chapter for which the pe	tle 11, United States Code, and rson is eligible. I also certify the	d have explained the relief at I have delivered to the debtor(s)			
f you are not represented by an attorney, you do not	knowledge after an inquiry that the information	the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.				
need to file this page.	s/Manuel A. Cardenas Signature of Attorney for Debtor	Date	<u>08/31/2017</u> MM / DD /YYYY			
	Manuel A. Cardenas					
	Printed name Law Offices of Manuel A. Cardenas and A	ssociates, P.C.				
	Firm name 2059 North Western Avenue Number Street					
	<u>Chicago</u> City	IL State	60647 ZIP Code			
	Contact phone <u>(773) 227-6858</u>	Email address	mac.cardenaslaw@att.net			
	6228970	<u>IL</u>				
	Bar number	State				

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill in this information to identify your case:					
Debtor 1	Oscar First Name	V. Middle Name	Sibri Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of Illinois					
Case number	(If known)				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets
	Value of what you own
Schedule A/B: Property (Official Form 106A/B)	\$
1a. Copy line 55, Total real estate, from Schedule A/B	Ψ
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>1,930.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>1,930.00</u>
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	. 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 17,280.00
Your total liabilities	\$ <u>17,280.00</u>
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$ 3,568.89
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22, Column A, of Schedule J	\$ <u>3,318.89</u>

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Debtor 1	Oscar	V.	Sibri	Case number (if known)
	Circl None	Middle Nesses	Last Name	

Part 4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this fo	rm to the court with your othe	r schedules.
 Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpos Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules. 	ses. 28 U.S.C. § 159.	
 From the Statement of Your Current Monthly Income: Copy your total current monthly income. Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 	come from Official	\$ <u>4,575.33</u>
e. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
9d. Student loans. (Copy line 6f.)9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ \$	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$,
9g. Total. Add lines 9a through 9f.	\$ 0.00	

Fill in this information to identify your case and this filing:					
Debtor 1	Oscar First Name	V. Middle Name	Sibri Last Name		
Debtor 2 (Spouse, if filing		Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of Illinois					
Case number					

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

What is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Śchedule D</i>
☐ Condominium or cooperative☐ Manufactured or mobile home☐ Land	Current value of the entire property?	portion you own?
Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this ite		mmunity property
What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule I</i>
☐ Condominium or cooperative☐ Manufactured or mobile home☐ Land	Current value of the entire property?	Current value of t portion you own?
	Φ	Φ
Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this ite property identification number: □ What is the property? Check all that apply. □ Single-family home □ Duplex or multi-unit building	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: □ What is the property? Check all that apply. □ Duplex or multi-unit building

1.3. Street address, if available, or other of City State County	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property ZIP Code Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	entire property? \$ Describe the nature of interest (such as fee the entireties, or a life Check if this is considered (see instructions) m, such as local	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by e estate), if known.
	ou own for all of your entries from Part 1, including any entries	s for pages	\$
you own that someone else drives. If you let 3. Cars, vans, trucks, tractors, sport uti No Yes		and Unexpired Leases.	
3.1. Make: toyota Model: Corolla	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Year: 1996 Approximate mileage: 98000 Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
If you own or have more than one, desc			* <u> </u>
3.2. Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	

Debtor 1

Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories X No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: portion you own? At least one of the debtors and another entire property? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$1,000.00 you have attached for Part 2. Write that number here

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Part 3: **Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe Household furniture	\$900.00
	φ <u>σσσ.σσ</u>
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printe	ers, scanners; music
collections; electronic devices including cell phones, cameras, media players, games	
☑ No	
Yes. Describe	\$
	Ψ
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art	t objects;
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
No No	
Yes. Describe	\$
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, go and kayaks; carpentry tools; musical instruments	If clubs, skis; canoes
☑ No ☐ Yes. Describe	
Yes. Describe	\$
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	
Tes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	\$600.00
	Ψ
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewel gold, silver	ry, watches, gems,
☑ No □ Voc Describe	¢
Yes. Describe	\$
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
☑ No	
Yes. Describe	\$
	Ψ
14. Any other personal and household items you did not already list, including any health aids	s you did not list
☑ No	
Yes. Give specific	
information	\$
	have effected 4.500.00
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you for Part 3. Write that number here	_ _ _ _ _ _ _ _ _ _ _ _ _ _ \
TOT I WILL OF THIRD WALL HAMILTON HOLD	

Part 4:	Describe Your Financial Assets	

Do yo	ou own or have any l	egal or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Ca		ave in your wallet, in your hom	e, in a safe deposit box, and on hand when you file	your petition	
	No Yes			ash:	\$ <u>30.00</u>
			nts; certificates of deposit; shares in credit unions, butiple accounts with the same institution, list each.	orokerage houses,	
	l No l Yes	,	Institution name:		
		17.1. Checking account:	Chase		\$-600.00
		17.2. Checking account:			\$
		17.3. Savings account:			\$
		17.4. Savings account:			\$
		17.5. Certificates of deposit:			\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
					4
Ex		or publicly traded stocks nvestment accounts with broke Institution or issuer name:	rage firms, money market accounts		
_	165				_
					\$ \$
19. N o	on-publicly traded st	ock and interests in incorpor	ated and unincorporated businesses, including	an interest in	
	n LLC, partnership, a		,g		
	No	Name of entity:	%	of ownership:	
_	Yes. Give specific information about				\$
	them				\$
				%	\$

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or 1	Oscar	٧.	Sibr	Document	Page 19 of figure (if known)	
	First Name	Middle Name	Last Nar	ne	1 age 10 01 01	

20.	Negotiable instruments in	nclude personal chec	er negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	
	☑ No☑ Yes. Give specific	Issuer name:		
	information about them			\$
				\$
				\$
21.	Retirement or pension Examples: Interests in IR No Yes. List each		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	account separately	Type of account:	Institution name:	
		401(k) or similar plan:		\$
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
	Examples: Agreements v companies, or others	deposits you have m	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications	
	☑ No			
	Yes		stitution name or individual:	
		Electric:		\$
		Gas:		\$
		Heating oil:	ntal unit:	\$
		Prepaid rent:	ital unit.	\$
		Telephone:		\$
		Water:		\$
		Rented furniture:		\$ \$
		Other:		\$
23.	☑ No		of money to you, either for life or for a number of years)	V
	☐ Yes	Issuer name and des	scription:	•
				\$ ¢
				\$ \$

24. Interests in an education IRA 26 U.S.C. §§ 530(b)(1), 529A(b		ed ABLE program, or under a qual	lified state tuition program.	
ĭ No	. , , ,			
	nstitution name and descri	ption. Separately file the records of a	any interests.11 U.S.C. § 521(c):
				\$
				\$
				Φ
				\$
25. Trusts, equitable or future int exercisable for your benefit	rests in property (other t	han anything listed in line 1), and	rights or powers	
ĭ No				
☐ Yes. Give specific				
information about them				\$
L				
26. Patents, copyrights, tradema				
•	es, websites, proceeds from	m royalties and licensing agreements	3	
☑ No				
Yes. Give specific				
information about them				\$
27. Licenses, franchises, and oth		e association holdings, liquor license	a professional licenses	
	usive licerises, cooperative	e association noidings, liquol license	s, professional licerises	
☑ No				
Yes. Give specific information about them				\$
information about them				Ψ
Money or property owed to you?				Current value of the portion you own? Do not deduct secured
				claims or exemptions.
28. Tax refunds owed to you				
ĭ No				
☐ Yes. Give specific informati			Federal:	\$
about them, including you already filed the re			State:	\$
and the tax years			Local:	¢
			Local.	Ψ
29. Family support				
	ı aııınony, spousai support	, child support, maintenance, divorce	e semement, property settleme	erii.
☑ No				
Yes. Give specific informati	n		Alimony:	¢
			Maintenance:	\$ \$
			Support:	\$ \$
			Divorce settlement:	
			Property settlement:	\$
30. Other amounts someone owe				
Examples: Unpaid wages, disa	ility insurance payments, d ïts; unpaid loans you mad	lisability benefits, sick pay, vacation p	pay, workers' compensation,	
•	no, unpaid idans you mad	e to someone else		
No No Cive enecific informati	_			
Yes. Give specific informati	П			\$

31.	Interests in insurance policies Examples: Health, disability, or life insurance	e: health savings account (HSA): c	redit homeowner's or renter's insurance	
	No	c, ricaliti savirigs account (rioz), c	redit, nomeowner 3, or renter 3 insurance	
	Van Name the income a comment	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				¢
				Ψ
32.	Any interest in property that is due you fill you are the beneficiary of a living trust, exproperty because someone has died.		policy, or are currently entitled to receive	
	☑ No			
	Yes. Give specific information			\$
	L			Φ
33.	Claims against third parties, whether or in Examples: Accidents, employment disputes No	_	ade a demand for payment	
	Yes. Describe each claim			
	Tes. Describe each claim			\$
34.	Other contingent and unliquidated claims	s of every nature, including coun	terclaims of the debtor and rights	
	to set off claims		Č	
	☐ Yes. Describe each claim			
				\$
35	Any financial assets you did not already	ist		
	No			
	Yes. Give specific information			
				\$
	Add the dollar value of all of your entries for Part 4. Write that number here			\$-570.00
	Tor Fart 4. Write that number here			Ψ_0.0.00
Pa	rt 5: Describe Any Business-R	elated Property You Own	or Have an Interest In. List any r	eal estate in Part 1.
37	Do you own or have any legal or equitabl	e interest in any business-related	d property?	
01.	No. Go to Part 6.	o miorest in any basiness related	- p. opo. ty .	
	Yes. Go to line 38.			
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
20	Accounts receivable or commissions var	a alroady parnod		
30.	Accounts receivable or commissions you No	alleady earlied		
	Yes. Describe			7
	Yes. Describe			\$
30	Office equipment, furnishings, and supp	ies		
JJ.			s, rugs, telephones, desks, chairs, electronic devices	
	ĭ No			
	☐ Yes. Describe			\$
				Ψ

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40. Machinery, fixtures, 6	equipment, supplies you use in business, and tools of your trade		
ĭ No			
☐ Yes. Describe			\$
41. Inventory			
No I			7
Yes. Describe			\$
l			
42. Interests in partnersh	nips or joint ventures		
⊠ No			
☐ Yes. Describe	Name of entity:	% of ownership:	
		%	\$
		%	\$
		%	\$
43. Customer lists, mailin	ng lists, or other compilations		
	s include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
ĭ No	, , , , , , , , , , , , , , , , , , , ,	,	
Yes. Desc	cribe].
			\$
44 Any business-related	property you did not already list		
No No	property you did not already list		
Yes. Give specific			\$
information			
			\$
			\$
			\$
			\$
			\$
45. Add the dollar value	of all of your entries from Part 5, including any entries for pages you have atta	ached	*0.00
	number here		\$0.00
	ny Farm- and Commercial Fishing-Related Property You Own or Have	re an Interest In	
If you own o	r have an interest in farmland, list it in Part 1.		
46 Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related prop	ertv?	
No. Go to Part 7.	any logar of equitable interest in any farm of commercial horning related prop-		
Yes. Go to line 47.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
47. Farm animals			
	poultry, farm-raised fish		
☑ No☑ Yes			7
■ res			
			\$

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48. Crops—either growing or harvested X No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade X No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☑ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☑ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form \$ 0.00 55. Part 1: Total real estate, line 2..... 56. Part 2: Total vehicles, line 5 \$<u>1,000.00</u> \$1,500.00 57. Part 3: Total personal and household items, line 15 \$-570.00 58. Part 4: Total financial assets, line 36 \$0.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 +\$0.00 \$1,930.00 62. Total personal property. Add lines 56 through 61..... Copy personal property total → \$1,930.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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			Вобиноне					
Fill in this information to identify your case:								
Debtor 1	Oscar First Name	V. Middle Name	Sibri Last Name					
Debtor 2 (Spouse, if filing)		Middle Name	Last Name					
United States Bankruptcy Court for the: Northern District of Illinois								
Case number (If known)								

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any proper	ty you list on <i>Schedule A/B</i> th	nat you claim as exem _l	pt, fill in the information below.					
		on of the property and line on	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
		,	Copy the value from Schedule A/B	Check only one box for each exemption.					
	Brief description: Line from Schedule A/B:	See Attachment 1 3.1	\$1,000.00		735 ILCS 5/12-1001(c)				
	Brief description: Line from Schedule A/B:	Household furniture 6	\$ 900.00	 ∑ \$ 900.00 ☐ 100% of fair market value, up to any applicable statutory limit 	735 ILCS 5/12-1001(b)				
	Brief description: Line from Schedule A/B:	Necessary clothes	\$_600.00	 ∑ \$ 600.00 100% of fair market value, up to any applicable statutory limit 	735 ILCS 5/12-1001(a)				
3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)									

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Debtor 1

Part 2: Additional Page Brief description of the property and line Current value of the Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(b) Brief cash on hand \$30.00 \$ 30.00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$**. description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief □ \$_ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$**_ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **□** \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief □ \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **□** \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **□** \$ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief □ \$ _ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief □ \$ _ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief **\$**_ description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: **Brief** description: ☐ 100% of fair market value, up to Line from

Schedule A/B:

any applicable statutory limit

Attachment Debtor: Oscar V. Sibri Case No:

Attachment 1

1996 toyota Corolla with 98000 miles.

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Fill in this in	formation to identify	your case:		. sigs =			
Debtor 1	Oscar V. Sibri						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Northern District of Illinois							
Case number (If known)							

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any	creditors	have	claims	secured	by	your	property	/?
----	--------	-----------	------	--------	---------	----	------	----------	----

- Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecure portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]		
Number Street				
. Calox	As of the date you file, the claim is: Check all that apply.	_		
	☐ Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
7 	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
b				
	Describe the property that secures the claim:	\$	_ \$.\$
Creditor's Name]		
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
0	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Community dept				

Of 61	Debtor 1 Debtor 2 (Spouse, if filing United States Case number (If known) Official Sched Be as compl	Oscar V. Sibri First Name Bankruptcy Court for the: Bankruptcy Court	Middle Name Middle Name Northern Dis editors Versible. Use Pary contracts or and on Scheims that are list it out, number	Nho Have Unit of the control of the	Insecure PRIORITY claim could result in	ed Claims			ded filing
Debtor 2 Spreas, Hings Hint Hore Mods Name Last Northern District of Illinois	Debtor 2 (Spouse, if filing United States Case number (If known) Official Sched Be as compl	First Name Bankruptcy Court for the: Bankruptcy Court for the: Form 106E/F Lie E/F: Cre Lie ete and accurate as poor party to any executor by (Official Form 106A/E), the partially secured clair y the Part you need, fill all pages, write your name	Northern Dis	Nho Have Unit of the control of the	PRIORITY claim could result in				ded filing
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Illinois Department of Revenue Last 4 digits of account number \$.5ee \$.5ee \$.0.00	<u> </u>							amount	amount
Priority Creditor's Name 100 West Randolph St. Number Street As of the date you file, the claim is: Check all that apply. Chicago IL 60601 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another State claim subject to offset? No Yes 22 Internal Revenue Department Priority Creditor's Name 2001 Butterfield Rd Number Street Downers Grove IL 60515 City State ZIP Code Who incurred the debt? Check one. Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify When was the debt incurred? As of the date you file, the claim is: Check all that apply. See \$See \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim:	2.1 Illino	is Department of Re	evenue	Last 4 digits of acc	count number	\$ See)	\$See	\$ 0.00
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Chicago IL 60601 State ZIP Code Unliquidated Disputed Dispute				When was the deb	t incurred? _				
Chicago IL 60601 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes 2.2 Internal Revenue Department Priority Creditor's Name 2001 Butterfield Rd Number Street Downers Grove IL 60515 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only □ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ Other. Specify ☐ When was the debt incurred? ☐ As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Disputed ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Other Specify ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Dis				— As of the date you	file, the claim is	: Check all that apply			
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□ Debtor 2 only Type of PRIORITY unsecured claim: □ Debtor 1 and Debtor 2 only □ Domestic support obligations □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ Claims for death or personal injury while you were intoxicated □ No □ Other. Specify □ Yes □ Other. Specify Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify Other. Specify Other. Specify Other. Specify Other was the debt incurred? As 4 digits of account number Street See \$ 0.00 Downers Grove IL City State ZIP Code Other was the debt incurred? □ Contingent Unliquidated Unliquidated Disputed Disputed Disputed Disputed Disputed Disputed Debtor 2 only	_		one.						
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Is the claim subject to offset? Internal Revenue Department Priority Creditor's Name 2001 Butterfield Rd Number Street Downers Grove IL City State ZIP Code Who incurred the debt? Check one. Debtor 2 only Internal Revenue Department Last 4 digits of account number \$See \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:	☐ Ch	eck if this claim is for a	community deb	4 _					
Yes	Is the	claim subject to offset?		intoxicated		•			
Internal Revenue Department				U Other. Specify _					
Priority Creditor's Name 2001 Butterfield Rd Number Street Downers Grove IL 60515 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Last 4 tights of account number \$ see \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:									
2001 Butterfield Rd Number Street As of the date you file, the claim is: Check all that apply. Downers Grove IL 60515 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim:	IIIICI		tment	Last 4 digits of acc	count number _	\$ <u>Se</u>)	\$See	\$ 0.00
As of the date you file, the claim is: Check all that apply. Downers Grove IL 60515 City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only	,			When was the deb	t incurred?				
Downers Grove IL 60515 City State ZIP Code Unliquidated Who incurred the debt? Check one. ☑ Debtor 1 only Type of PRIORITY unsecured claim: ☐ Debtor 2 only	Number	Street		— Δs of the date you	file the claim is	* Check all that apply			
City State ZIP Code Unliquidated Who incurred the debt? Check one. ☑ Debtor 1 only Type of PRIORITY unsecured claim: ☐ Debtor 2 only ☐ Demonstrabilizations		O II	00545		me, the damin	. Oncor all that apply.			
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ Demonstrate this support abilities.				•					
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 3 only ☐ Debtor 3 only	1			:					
☐ Debtor 2 only	☑ Del	btor 1 only		Type of PDIODITY	Y unsecured of	nim:			
□ DOLLEGIIC SUDDOLL CONCENCIO						•••••			
Debtor 1 and Debtor 2 only					-	owe the government			
At least one of the deptors and another Claims for death or personal injury while you were				Claims for death	=	-			
Check if this claim is for a community debt intoxicated			community deb	t intoxicated		•			
	Is the □			Other. Specify					
Is the claim subject to offset?	□ Yes								

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Part	2:	l ic

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you ☐ No. You have nothing to report in this part. Submit this form to the ☐ Yes		
	List all of your nonpriority unsecured claims in the alphabetical opiority unsecured claim, list the creditor separately for each claim. For included in Part 1. If more than one creditor holds a particular claim, I fill out the Continuation Page of Part 2.	or each claim listed, identify what type of claim it is. Do not list	claims already
			Total claim
l.1], _,_,		
	Amer Fst Fin Nonpriority Creditor's Name	Last 4 digits of account number <u>0</u> <u>0</u> <u>1</u>	\$ 0.00
		When was the debt incurred?	
	7330 W. 33rd Street		
	Wichita KS 67205		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	☑ Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	× No	Other. Specify	
	☐ Yes	, ,	
	1		- 0 00
1.2	Amex	Last 4 digits of account number 2 2 9 3	\$ 0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	P.o. Box 981537 Number Street		
	Number Street El Paso TX 79998	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	D Continuent	
	Miles in surround the Idek (O.O.)	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☑ No ☑ Yes	- Other Opening	
	☐ Yes		
1.3	Capital One	Last 4 digits of account number 5 4 2 4	\$ 0.00
	Nonpriority Creditor's Name	When was the debt incurred?	\$ 0.00
	15000 Capital One Dr		
	Number Street		
	Richmond VA 23238 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No No	Other. Specify	
	☐ Yes	· · · · · · · · · · · · · · · · · · ·	

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Capital One	Last 4 digits of account number 0 5 1 5	\$ <u>0.00</u>
Nonpriority Creditor's Name 15000 Capital One Dr	When was the debt incurred?	
Number Street Richmond VA 23238	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No □ Yes		
Capital One	Last 4 digits of account number 8 4 5	<u>\$ 541.</u>
Nonpriority Creditor's Name	When was the debt incurred?	
15000 Capital One Dr		
Richmond VA 23238	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
☑ No □ Yes	. ,————————	
Chase (Po Box 15298, Wilmington, Delaware 19850)	Last 4 digits of account number	\$ 600.0
Nonpriority Creditor's Name	When was the debt incurred?	
Po Box 15298 Number Street		
Wilmington DE 19850	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
☑ Debtor 1 only	T. (MANDRIADITY)	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
s the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
No Yes		

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fter listing any entries on this page, number them beginning wit	th 4.5, followed by 4.6, and so forth.	Total clain
Chase Card	Last 4 digits of account number 3 3 1 8	\$ 545.00
Nonpriority Creditor's Name Po Box 15298	When was the debt incurred?	
Number Street Wilmington DE 19850	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No	Other. Specify	
☐ Yes		
Chase Card	Last 4 digits of account number 8 1 3 6	\$ <u>0.00</u>
Nonpriority Creditor's Name	When was the debt incurred?	
Po Box 15298 Number Street	<u> </u>	
Wilmington DE 19850	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No ☐ Yes		
Chase Card Services	Last 4 digits of account number 2 3 5 5	\$ 0.00
Nonpriority Creditor's Name	_	
Po Box 15298	When was the debt incurred?	
Number Street Wilmington DE 19850	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No	Other. Specify	
Yes		

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	Onemain	Last 4 digits of account number 0 0 5 2	\$ <u>4,699.00</u>
	Nonpriority Creditor's Name Po Box 1010	When was the debt incurred?	
	Number Street Evansville IN 47706	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	ls the claim subject to offset?	☐ Other. Specify	
	☑ No □ Yes		
4.11	Onemain	Last 4 digits of account number 2 5 1 5	\$ 5,995.00
	Nonpriority Creditor's Name Po Box 1010	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Evansville IN 47706 City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	 □ At least one of the debtors and another □ Check if this claim is for a community debt 	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	☑ No ☑ Yes		
4.12	Onemain Financial	Last 4 digits of account number 2 8 6 0	\$0.00
	Nonpriority Creditor's Name 6801 Colwell Blvd	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	IrvingTX75039CityStateZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	☑ No ☐ Yes	Grief: Specify	

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After listing any entries on this page, number them beginning with	h 4.5, followed by 4.6, and so forth.	Total claim
Onemain Financial	Last 4 digits of account number 7 0 3 5	\$ 0.00
Nonpriority Creditor's Name 6801 Colwell Blvd	When was the debt incurred?	
Number Street Irving TX 75039	As of the date you file, the claim is: Check all that apply.	
Irving TX 75039 City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
NoYes	Other. Specify	
0.14	Last 4 digits of account number 4 2 9 1	\$ 0.00
Nonpriority Creditor's Name	_	·
1600 Seaport Blvd	When was the debt incurred?	
Redwood City CA 94063	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No □ Yes		
I.15	Last 4 digits of account number _1 _5 _8 _9	\$ 0.00
Oportun Nonpriority Creditor's Name	_	
1600 Seaport Blvd	When was the debt incurred?	
Redwood City CA 94063	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Debts to pension or profit-snaring plans, and other similar debts Other. Specify	
☑ No		
☐ Yes		

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Part 2:

Nonprionly Creditor's Name 1600 Seaport Blvd Number Street Redwood City CA 94063 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Is the claim subject to offset? Number Street Nonprionly Creditor's Name 1.17 Turner Acceptance Crp Neoprionly Creditor's Name Street Number Street Number Street Skokie IL 60077 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Turner Acceptance Crp Neoprionly Creditor's Name Street Skokie IL 60077 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Check if this claim is for a community debt is the claim subject to offset? Neoprionly Creditor's Name Street Show Howard St Number Street Show Howard St Numb	\$ <u>3,586.00</u>
As of the date you file, the claim is: Check all that apply. Redwood City	\$_0.00
As of the date you file, the claim is: Check all that apply. Contingent Contin	\$_0.00
Contingent Unliquidated Unliquidated Disputed	\$_0.00
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only At least one of the debtors and another Debtor 6 is the claim is for a community debt Debtor 7 and Debtor 9 only At least one of the debtors and another Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 as priority claims Debtor 3 as priority claims Debtor 3 only Debtor 4 is digits of account number 4 1 8 7 When was the debt incurred? As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Debtor 2 only At least one of the debtors and another Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 is the claim is for a community debt Debtor 6 is the claim is for a community debt Debtor 7 only Debtor 8 is the claim is for a community debt Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 is debtors and another Debtor 5 only Debtor 6 is debtor 8 is debtor 9 is debto	\$_0.00
Debtor 2 only	\$_0.00
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Noportionly Creditor's Name 5900 W Howard St Number Street Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Noportionly Creditor's Name Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Noportionly Creditor's Name Check if this claim is for a community debt Is the claim subject to offset? Noportionly Creditor's Name Contingent Con	\$_0.00
Check if this claim is for a community debt State Claim subject to offset? Check if this claim subject to offset? Clai	\$ <u>0.00</u>
Debts to pension or profit-sharing plans, and other similar debts	\$ <u>0.00</u>
Turner Acceptance Crp Nonprionty Creditor's Name 5900 W Howard St Number Street Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? I Last 4 digits of account number 4 1 8 7 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify	\$ <u>0.00</u>
Turner Acceptance Crp Nonpriority Creditor's Name 5900 W Howard St Number Street Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Yes Last 4 digits of account number 4 1 8 7 When was the debt incurred? As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify Other. Specify Other. Specify Other Spe	\$ <u>0.00</u>
Turner Acceptance Crp Nonpriority Creditor's Name 5900 W Howard St Number Street Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number 4 1 8 7 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify	\$ 0.00
Nonpriority Creditor's Name 5900 W Howard St Number Street Skokie IL 60077 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Skokie IL 60077 City State ZIP Code Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Otheck if this claim is for a community debt Is the claim subject to offset? No Yes	
Skokie City State Contingent Unliquidated Disputed State S	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Pobtor 1 only □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Peter of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student roans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
□ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Check if this claim is for a community debt □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? No Yes	
☐ No ☐ Yes	
☐ Yes	
Turner Acceptance Crp Last 4 digits of account number 0 7 3 1	\$ 0.00
Nonpriority Creditor's Name	
5900 W Howard St	
Skokie IL 60077 As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Contingent	
Who incurred the debt? Check one. Unliquidated Disputed	
Debtor 1 only	
☐ Debtor 2 only Type of NONPRIORITY unsecured claim:	
□ Debtor 1 and Debtor 2 only □ Student loans	
☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that	
□ Check if this claim is for a community debt you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	
☑ No □ Yes	

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4.19	Turner Acceptance Crp Nonpriority Creditor's Name	Last 4 digits of account number 2 0 9 7	\$ <u>0.00</u>
	5900 W Howard St	When was the debt incurred?	
	Number Street Skokie IL 60077	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	No Yes	_ culti- specify	
4.20	Turner Acceptance Crp	Last 4 digits of account number 1 9 7 0	\$ 0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	5900 W Howard St Number Street	As of the date you file the claim is: Check all that apply	
	Skokie IL 60077 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
		☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	No Yes	Other. Specify	
1.21	Turner Acceptance Crp	Last 4 digits of account number <u>0</u> <u>1</u> <u>5</u> <u>0</u>	\$_1,314.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	5900 W Howard St		
	Skokie IL 60077	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	☐ At least one of the debtors and another	☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☑ No ☐ Yes	Other. Specify	
	— 165		

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
6a. Domestic support obligations	6a.	\$0.00
6b. Taxes and certain other debts you owe the government	6b.	<u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c.	<u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
6e. Total. Add lines 6a through 6d.	6e.	§0.00
		Total claim
6f. Student loans	6f.	\$0.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	<u>\$0.00</u>
Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$0.00
6j. Total. Add lines 6f through 6i.	6j.	\$ <u>0.00</u>
	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

Attachment Debtor: Oscar V. Sibri Case No:

Attachment 1

for notice purposes only for notice purposes only

Attachment 2

for notice purposes only for notice purposes only

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e Name	
	Last Name
e Name	Last Name
n District of Illinois	
	-

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			nave the contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	-
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this i	nformation to ide	entify your case:			
Debtor 1	Oscar V. Sibri First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	•	Middle Name or the: Northern District of III	Last Name		
Case number					☐ Check if this is an
Official	Form 106l	- 1			amended filing

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	ĭ No	codebtors? (If you are	filing a joint case, do no	t list either spouse as	s a codebtor.)				
	☐ Yes								
2.	2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)								
	☑ No. Go to line	3.							
		spouse, former spouse,	, or legal equivalent live	with you at the time?					
	□ No			•					
		nich community state or	territory did you live?		. Fill in the name and current address of that person.				
		non community state of							
	Name of yo	ur spouse, former spouse, or leg	gal equivalent						
	Number	Street							
	City		State	ZIP Code					
3.	In Column 1. list	all of your codebtors.	Do not include vour sp	ouse as a codebtor	if your spouse is filing with you. List the person				
	•	•			r. Make sure you have listed the creditor on				
		•		~	ile G (Official Form 106G). Use Schedule D,				
		r Schedule G to fill out		100E/1 /, Or Correct	ine o (omolar orm 1000). Ode obnedule b,				
	Column 1: Your	codebtor			Column 2: The creditor to whom you owe the debt				
					Check all schedules that apply:				
3.1					· · ·				
0.1	Name				Schedule D, line				
	Name				☐ Schedule E/F, line				
	Number Str	eet			Schedule G, line				
					·				
	City		State	ZIP Code					
3.2					D. Ostanti D. Par				
	Name				Schedule D, line				
					Schedule E/F, line				
	Number Str	eet			☐ Schedule G, line				
	City		State	ZIP Code					
3.3	Only Only		Oidio	Zii Oode					
0.0	J				Schedule D, line				
	Name				Schedule E/F, line				
	Number Str	eet			Schedule G, line				
					Goriodaic O, inio				
	City		State	ZIP Code					

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			ment Page 40 of 6	· -
III in this in	formation to identify y	our case:		
ebtor 1	Oscar V. Sibri			
	First Name	Middle Name	Last Name	
ebtor 2 couse, if filing)	First Name	Middle Name	Last Name	
nited States E	Bankruptcy Court for the: _	Northern District of Illinois	S	
ase number				Check if this is:
f known)				☐ An amended filing
				☐ A supplement showing post-petition
«: .: . I 🗆 .	4001			chapter 13 income as of the following date
	orm 106l	_		MM / DD / YYYY
ched	lule I: You	r Income		12/
Part 1:	Describe Employm	ent		
Fill in you information	ır employment on.		Debtor 1	Debtor 2 or non-filing spouse
attach a s	e more than one job, eparate page with on about additional	Employment status	EmployedNot employed	☐ Employed☐ Not employed
employers				
employers	art-time, seasonal, or			
employers Include pa	art-time, seasonal, or	Occupation	Driver/Delivery	
employers Include pa self-emplo Occupatio	art-time, seasonal, or byed work. on may Include student	Occupation Employer's name	Driver/Delivery C.O.W.M. Inc	
employers Include pa self-emplo Occupatio	art-time, seasonal, or byed work. on may Include student	·	<u> </u>	Number Street
employers Include pa self-emplo Occupatio	art-time, seasonal, or byed work. on may Include student	Employer's name	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616	
employers Include pa self-emplo Occupatio	art-time, seasonal, or byed work. on may Include student	Employer's name	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616	
employers Include pa	art-time, seasonal, or byed work. on may Include student	Employer's name	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616 City State ZII	
employers Include pa self-emplo Occupatio or homem	art-time, seasonal, or byed work. on may Include student	Employer's name Employer's address How long employed the	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616 City State ZII	
employers Include pa self-emplo Occupatio or homem	art-time, seasonal, or byed work. on may Include student haker, if it applies. Give Details About monthly income as of	Employer's name Employer's address How long employed the Monthly Income the date you file this fo	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616 City State Zli	
employers Include pa self-emplo Occupatio or homem Part 2: Estimate spouse ur If you or y	art-time, seasonal, or oped work. on may Include student haker, if it applies. Give Details About monthly income as of pless you are separated our non-filing spouse ha	Employer's name Employer's address How long employed the Monthly Income the date you file this fo	C.O.W.M. Inc 1835 South Canal St Number Street Chicago, IL 60616 City State Zli rm. If you have nothing to report yer, combine the information for	P Code City State ZIP Co

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

\$ 2,166.67

\$ 4,575.33

3. **+**\$_2,408.66

\$ 0.00

\$ 0.00

+ \$ 0.00

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Debtor 1

Oscar V. Sibri First Name

Middle Name Last Name Page 41 of 61

Case number (if known)

For Debtor 1 For Debtor 2 or non-filing spouse \$<u>4,575</u>.33 \$ 0.00 Copy line 4 here 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$ 1,006.44 \$ 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 0.00 5e. Insurance 5e. \$ 0.00 \$ 0.00 5f. Domestic support obligations 5f. \$ 0.00 \$ 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: 5h. +\$ 0.00 + \$ 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ 1,006.44 \$ 0.00 \$ 3,568.89 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$_0.00 \$ 0.00 monthly net income. 8a. 8b. Interest and dividends 8h \$ 0.00 \$ 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$ 0.00 \$ 0.00 settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation b8 8e. 8e. Social Security \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental \$ 0.00 \$ 0.00 Nutrition Assistance Program) or housing subsidies. Specify: n/a 8f. 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: N/A 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$ 0.00 9. \$ 0.00 Calculate monthly income. Add line 7 + line 9. \$ 3,568.89 \$ 0.00 \$ 3,568.89 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: n/a 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 3,568.89 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? × No. Yes. Explain:

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	Document	Page 42 of 61		
Fill in this information to identify y	our case:			
Debtor 1 Oscar V. Sibri		Chook if this is		
First Name Debtor 2	Middle Name Last Name	Check if this is:		
(Spouse, if filing) First Name	Middle Name Last Name	An amended fi	•	actition abouter 12
United States Bankruptcy Court for the:	Northern District of Illinois		snowing post-p of the following of	etition chapter 13 date:
Case number(If known)		MM / DD / YYYY		
Official Form 106J				
Schedule J: You	ır Expenses			12/15
information. If more space is needed (if known). Answer every question.	d, attach another sheet to this form.	ng together, both are equally responsion on the top of any additional pages, w		-
Part 1: Describe Your Hou	senoia			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a s	separate household?			
☑ No ☐ Yes. Debtor 2 must file	e Official Forms 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'	cach aspendent	daughter	17	☐ No ☑ Yes
names.		daughter	20	☐ No
		daugniei	20	× Yes
				☐ No
				Yes
				□ No
				Yes
				☐ No ☐ Yes
Do your expenses include expenses of people other than yourself and your dependents?	X No☐ Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
		re using this form as a supplement in	n a Chanter 13 c	ase to report
		ental <i>Schedule J</i> , check the box at the	-	-
applicable date.			-	
	-cash government assistance if you		Your exper	nses
such assistance and have included	ı it on əcnequie i: Your income (Offi	CIAI FORM B 1001.)	. our exper	

4. The rental or home ownership expenses for your residence. Include first mortgage payments and

\$1,200.00 4. \$ 0.00 4a. \$ 0.00 4b.

\$ 0.00

\$0.00

4c.

4d.

If not included in line 4: Real estate taxes 4a.

any rent for the ground or lot.

Property, homeowner's, or renter's insurance 4b.

Home maintenance, repair, and upkeep expenses 4c. 4d. Homeowner's association or condominium dues

Schedule J: Your Expenses

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Debtor 1 Oscar V. S

Oscar V. Sibri
First Name Middle Name

Last Name

Case number (if known)_

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$_0.00
		5.	
6.	Utilities:		\$ 160.00
	6a. Electricity, heat, natural gas	6a.	,
	6b. Water, sewer, garbage collection	6b.	\$ <u>0.00</u> \$ 250.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	*
	6d. Other. Specify:	6d.	\$ 0.00
7.	Food and housekeeping supplies	7.	\$_650.00
8.	Childcare and children's education costs	8.	\$_0.00
9.	Clothing, laundry, and dry cleaning	9.	\$_100.00
10.	Personal care products and services	10.	\$ 30.00
11.	Medical and dental expenses	11.	\$ 30.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$_250.00
40			¢ 0 00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$_0.00
14.	Charitable contributions and religious donations	14.	\$_0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$_0.00
	15b. Health insurance	15b.	\$ <u>373.89</u>
	15c. Vehicle insurance	15c.	\$ <u>75.00</u>
	15d. Other insurance. Specify:	15d.	\$ <u>0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$_0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$ 0.00
	17b. Car payments for Vehicle 2	17b.	\$_0.00
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
40		.,	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$ 0.00
10	Other nayments you make to support others who do not live with you		
19.	Other payments you make to support others who do not live with you. Specify:	19.	\$ 0.00
00			·
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		\$ 0.00
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b.	\$ <u>0.00</u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$ 0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$ <u>0.00</u>
	20e. Homeowner's association or condominium dues	20e.	\$_0.00

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ebtor 1	Oscar V. Sibri	Case number (if known)	
	First Name Middle Name Last Name		
1. Other.	Specify: school expenses	_ 21.	+\$_200.00
22a. Ad 22b. C	ate your monthly expenses. dd lines 4 through 21. ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form dd line 22a and 22b. The result is your monthly expenses.	106J-2 22.	\$ 3,318.89 \$ \$ 3,318.89
. Calcula	te your monthly net income.		
23a. C	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$ <u>3,568.89</u>
23b. C	opy your monthly expenses from line 22 above.	23b.	- \$3,318.89
	ubtract your monthly expenses from your monthly income. ne result is your <i>monthly net income</i> .	23c.	\$_250.00
For exa	expect an increase or decrease in your expenses within the year mple, do you expect to finish paying for your car loan within the year on the payment to increase or decrease because of a modification to the teat	or do you expect your	
Yes.	Explain here:		

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Fill in this in	formation to identify	your case:	
Debtor 1	Oscar V. Sibri		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States B	Bankruptcy Court for the:	Northern	District Of Illinois
Case number			
(If known)			
			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	summary and schedules filed with this declaration and
Signature of Deptor 1	Signature of Debtor 2
Date	Date
MM / DD / YYYY	MM / DD / YYYY

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Fill in this information to identify your case:							
Debtor 1	Oscar	V.	Sibri				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)							

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1	Give Details About Y	our Marital State	us and Where Yo	ou Lived Before	
2. Dur	Married Not married ing the last 3 years, have younger. No Yes. List all of the places you	ou lived anywhere o			
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street City	State ZIP Code	From To	Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor 1 From To
	Number Street	State ZIP Code	From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
and 🗵	I territories include Arizona, C	alifornia, Idaho, Loui	isiana, Nevada, Nev	City State ZIP Code ralent in a community property state or territory? (Community Pro	Community property states onsin.)

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 Debtor 1
 Oscar V. Sibri | First Name
 Last Name
 Case number (if known) | Case number (if known) |

Fill in the total amount of income you received If you are filing a joint case and you have inco	I from all jobs and all busir		me activities.	idar years?
NoYes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$34,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year: (January 1 to December 31, 2016 YYYY)	X Wages, commissions, bonuses, tips☐ Operating a business	\$ <u>45,000.00</u>	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For the calendar year before that: (January 1 to December 31, 2015 YYYY)	Wages, commissions, bonuses, tipsOperating a business	\$ <u>48,000.00</u>	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you	ome is taxable. Examples rental income; interest; div have income that you recome	of other income are aliminated as a simple of the office of the other office office of the other office office of the other of	d from lawsuits; royalties; ar y once under Debtor 1.	
Include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you	ome is taxable. Examples rental income; interest; div have income that you recome	of other income are aliminated as a simple of the office of the other office office of the other office office of the other of	d from lawsuits; royalties; ar y once under Debtor 1.	
and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e	ome is taxable. Examples rental income; interest; div have income that you recome	of other income are aliminated of other income are aliminated of other incomes are aliminated of other income are aliminated of other incomes are aliminated of other in	d from lawsuits; royalties; ar y once under Debtor 1.	
Include income regardless of whether that include income regardless of whether that included and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do	of other income are aliminated of other income are aliminated of other incomes are aliminated of other income are aliminated of other incomes are aliminated of other in	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4.	Gross income from each source
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No Yes. Fill in the details.	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimited as a limited as	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
Include income regardless of whether that include income regardless of whether that included and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimited as a limited as	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
Include income regardless of whether that include income regardless of whether that included other public benefit payments; pensions; winnings. If you are filing a joint case and you will be taken source and the gross income from each of the latest No of the latest Yes. Fill in the details. From January 1 of current year until	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimited as a limited as	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions an
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No Yes. Fill in the details.	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimited are alimited as; money collected elived together, list it only a not include income that are ach source (before deductions and exclusions) \$	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimitidends; money collected eived together, list it only onot include income that onot include income that cach source (before deductions and exclusions) \$	d from lawsuits; royalties; ary once under Debtor 1. It you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,)	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimitidends; money collected eived together, list it only a not include income that are alimitidents; money collected eived together, list it only a not include income that are alimitidents. Gross income from each source (before deductions and exclusions) \$	d from lawsuits; royalties; ar y once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that include income regardless of whether that include and other public benefit payments; pensions; winnings. If you are filing a joint case and you List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,)	ome is taxable. Examples rental income; interest; div have income that you rectach source separately. Do Debtor 1 Sources of income	of other income are alimitidends; money collected elived together, list it only not include income that are alimitidents; money collected elived together, list it only not include income that are alimitidents and exclusions and exclusions and exclusions are seen as a seen are alimitidents.	d from lawsuits; royalties; ary once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)

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Debtor 1 Oscar V. Sibri Case number (if known)_____

re either	Debtor 1's or Debtor 2's debts p	primarily co	nsumer debts	?		
	either Debtor 1 nor Debtor 2 has				defined in 11 U.S.C. § 101(8	3) as
	uring the 90 days before you filed	•	•		5,425* or more?	
	No. Go to line 7.					
	Yes. List below each creditor to total amount you paid that child support and alimony.	creditor. Do	not include pa	yments for domestic supp	ort obligations, such as	
* (Subject to adjustment on 4/01/19			•	• •	
Yes. D	ebtor 1 or Debtor 2 or both have	e primarily o	consumer deb	ts.		
	uring the 90 days before you filed				600 or more?	
	No. Go to line 7.	·				
_						
L	Yes. List below each creditor to creditor. Do not include pa	yments for c	domestic suppo	ort obligations, such as ch	ild support and	
	alimony. Also, do not inclu	de payments	s to an attorney	for this bankruptcy case.	•	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
				\$	\$	☐ Mortgage
	Creditor's Name			,		☐ Car
	North are Otract					Credit card
	Number Street					Loan repayment
						☐ Suppliers or vendor
	City	ZID Code				Other
	City State	ZIP Code				
				\$	\$	
				Ψ	Ψ	☐ Mortgage
	Creditor's Name					
	Creditor's Name					Car
	Creditor's Name Number Street					Credit card
						☐ Credit card ☐ Loan repayment
						☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor
		ZIP Code				☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor
	Number Street	ZIP Code		\$	\$	☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other
	Number Street	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendor Other Mortgage
	Number Street City State	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	Number Street City State	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card
	Number Street City State Creditor's Name	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment
	Number Street City State Creditor's Name	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendo Other Mortgage Car Credit card

First Name

Middle Name

Last Name

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Case number (if known)_

ithin 1 year before you filed to siders include your relatives; a progrations of which you are ar lent, including one for a busing ch as child support and alimo	iny general pai n officer, direct ess you operat	rtners; relati or, person i	ives of any g n control, or	general partners; pa owner of 20% or n	artnerships of which nore of their voting	n you are a general partner; securities; and any managing
l No						
Yes. List all payments to an	insider.					
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				\$	\$	
Number Street						
City	State ZIP C	Code				
Insider's Name				\$	\$	
Number Street						
Number Street						
Number Street City	State ZIP C	Code				
City	or bankruptcy	y, did you r igned by an		ayments or transfe	er any property on	account of a debt that benefited
City thin 1 year before you filed for insider? Clude payments on debts guar	or bankruptcy	y, did you n igned by an sider.		Total amount	er any property on Amount you still owe	account of a debt that benefited Reason for this payment Include creditor's name
City thin 1 year before you filed for insider? Clude payments on debts guar	or bankruptcy	y, did you n igned by an sider.	insider.	Total amount	Amount you still	Reason for this payment
City thin 1 year before you filed for insider? Clude payments on debts guar No Yes. List all payments that be	or bankruptcy	y, did you n igned by an sider.	insider.	Total amount paid	Amount you still owe	Reason for this payment
City thin 1 year before you filed for insider? Clude payments on debts guar No I Yes. List all payments that be	or bankruptcy	y, did you n	insider.	Total amount paid	Amount you still owe	Reason for this payment
City thin 1 year before you filed for insider? clude payments on debts guar I No I Yes. List all payments that be Insider's Name Number Street	or bankruptcy	y, did you n	insider.	Total amount paid	Amount you still owe	Reason for this payment
City thin 1 year before you filed for insider? clude payments on debts guar I No I Yes. List all payments that be Insider's Name Number Street	or bankruptcy	y, did you n	insider.	Total amount paid	Amount you still owe	Reason for this payment

City

State

ZIP Code

Oscar V. Sibri

Middle Name

Last Name

Debtor 1

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 Debtor 1
 Oscar V. Sibri | First Name
 Case number (if known) | Middle Name

all such matters, including pers contract disputes.	onal injury cases,	small claims actions, d	ivorces, collection suits, paterni	ty actions, suppo	rt or custody modificatio
No ⁄es. Fill in the details.					
	Natur	e of the case	Court or agency		Status of the case
Case title_					— Pending
Case IIIIe			Court Name		On appeal
			Number Street		Concluded
Case number					
			City State	e ZIP Code	
Case title					— Pending
Case IIIIe			Court Name		On appeal
			Number Street		Concluded
Case number			-		
			City State	e ZIP Code	
No. Go to line 11. Yes. Fill in the information below	w.				
	w.	Describe the proper	rty	Date	Value of the property
	w.	Describe the proper	rty	Date	
	w.	Describe the proper	rty	Date	Value of the property
es. Fill in the information below	w.	Describe the proper		Date	
es. Fill in the information below	w.	-	ned	Date	
es. Fill in the information below	w.	Explain what happe Property was Property was	ned repossessed. foreclosed.	Date	
Creditor's Name Number Street		Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished.	Date	
Creditor's Name Number Street	W. State ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	\$
Creditor's Name Number Street		Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
Creditor's Name Number Street City		Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$
Creditor's Name Number Street		Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$Value of the propert
Creditor's Name Number Street City		Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$Value of the propert
Creditor's Name City Creditor's Name City Creditor's Name		Explain what happe Property was Property was Property was Property was Describe the property Explain what happe	ned repossessed. foreclosed. garnished. attached, seized, or levied.		\$Value of the propert
Creditor's Name City Creditor's Name City Creditor's Name		Explain what happe Property was Property was Property was Property was Describe the property Explain what happe	ned repossessed. foreclosed. garnished. attached, seized, or levied. rty ned repossessed.		\$Value of the propert
Creditor's Name Number Street Creditor's Name Number Street		Explain what happe Property was Property was Property was Property was Property was Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied. rty ned repossessed. foreclosed.		Value of the propert

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ebtor 1	Oscar V. Sibri First Name Middle Name Last Na	Case number (if known)		
	thin 90 days before you filed for bankrupt counts or refuse to make a payment beca	cy, did any creditor, including a bank or financial institution	n, set off any am	ounts from your
	No	ase you owed a dest.		
	Yes. Fill in the details.			
		Describe the action the creditor took	Date action	Amount
	Creditor's Name		was taken	
	Cleuloi s Name			
	Number Street			\$
	City State ZIP Code	Last 4 digits of account number: XXXX		
	thin 1 year before you filed for bankruptcy editors, a court-appointed receiver, a cust	 was any of your property in the possession of an assigned odian. or another official? 	e for the benefit	of
	No	,		
	Yes			
Part :	5: List Certain Gifts and Contributi	ons		
13. Wi t	thin 2 years before you filed for bankruptc	y, did you give any gifts with a total value of more than \$60	0 per person?	
	No			
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value
	per person		the gifts	
	Person to Whom You Gave the Gift			\$
				\$
	Number Street			Ψ
	City State ZIP Code			
	Person's relationship to you			
	0.00	D	B	W.L.
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			\$
				Ф
	Number Street			Φ
	City State ZIP Code			

Debtor 1

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or 1	Oscar V. Sibri	Case number (if known)_		
	First Name Middle Name La	st Name		
With	in 2 years before you filed for bankru	ptcy, did you give any gifts or contributions with a total value	of more than \$600	to any charity?
X	No			
	Yes. Fill in the details for each gift or cor	ntribution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	that total more than \$600		Continuated	
_		_		\$
(Charity's Name			
				\$
	Number Street			
-		-		
_		-		
(City State ZIP Code			
rt 6:	List Certain Losses			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.		
				\$
				Ψ
rt 7:	List Certain Payments or Tra	nsfers		
With	nin 1 vear before you filed for bankrur	otcy, did you or anyone else acting on your behalf pay or trans	sfer any property to	anvone vou
	sulted about seeking bankruptcy or p		,,	, ,
Inclu	ude any attorneys, bankruptcy petition p	reparers, or credit counseling agencies for services required in yo	ur bankruptcy.	
	No			
	Yes. Fill in the details.			
	See Attachment 1	Description and value of any property transferred	Date payment or transfer was made	Amount of paymer
	Person Who Was Paid		Transfer was made	
	2059 North Western Avenue			
	Number Street		08/30/17	\$1,500.00
				\$
	Chicago IL 60647			·
	City State ZIP Code			
	man gardanaclaw@att = -t			
	mac.cardenaslaw@att.net Email or website address			
	Person Who Made the Payment, if Not You			

Entered 09/01/17 14:54:33 Desc Main Case 17-26461 Doc 1 Filed 09/01/17 Document Page 53 of 61 Oscar V. Sibri Debtor 1 Case number (if known)_ Middle Name Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City ZIP Code State Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Street Number ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. X No ☐ Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street

City

Number

ZIP Code

ZIP Code

State

State

Person's relationship to you

Person Who Received Transfer

Street

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tor 1	Oscar V. Sibri				Case numb	Dei (# known)_		
	First Name M	Middle Name	Last Na	me				
Mithin 4	40	4:1		did tu-u-f-uuuu		-1 4m a.m	aineilan daviaa af vul	riah
				cy, did you transfer any property et-protection devices.)	to a seit-settle	a trust or	similar device of wr	nich you
_	chencialy: (The	330 arc 0	non canca ass	ci-protection devices.)				
⊠ No								
	s. Fill in the detai	ls.						
				Description and value of the proper	ty transferred			Date transfer
					.,			was made
Nam	me of trust							
rt 8: L	List Certain F	inancia	l Accounts,	Instruments, Safe Deposit E	oxes, and Sto	orage Un	its	
Within '	1 year before ye	ou filed f	or bankruptcy	, were any financial accounts or	instruments he	eld in your	name, or for your b	enefit,
closed,	l, sold, moved, c	or transfe	erred?					
,				r other financial accounts; certif	icates of depos	it: shares	in banks, credit uni	ons.
	_	_	-	ves, associations, and other fin				····,
⊠ No	_		,,	,				
	s. Fill in the deta	nilo						
163	s. i iii iii tile deta	1113.						
				Last 4 digits of account number	Type of account		Date account was	Last balance before
					instrument		closed, sold, moved, or transferred	closing or transfe
Na	ame of Financial Insti	itution		XXXX-	☐ Checking			¢
				^^^~	- checking			Ψ
	ımber Street				☐ Savings			
	ımber Street				☐ Savings ☐ Money mark	cet		
	umber Street				_	cet		
		State	ZIP Code		☐ Money mark ☐ Brokerage	cet		
Nui		State	ZIP Code		Money mark	cet		
Nui		State	ZIP Code	YVVVV	☐ Money mark ☐ Brokerage ☐ Other	cet		•
City			ZIP Code	xxxx	Money mark Brokerage Other Checking	xet		\$
City	ty		ZIP Code	xxxx	☐ Money mark ☐ Brokerage ☐ Other	cet		\$
City	ty		ZIP Code	xxxx	Money mark Brokerage Other Checking			\$
City	ty ame of Financial Insti		ZIP Code	xxxx	Money mark Brokerage Other Checking Savings Money mark			\$
City	ty ame of Financial Insti		ZIP Code	xxxx	Money mark Brokerage Other Checking Savings Money mark Brokerage	Ket		\$
Nui City Nai	ty ame of Financial Insti umber Street	itution		xxxx	Money mark Brokerage Other Checking Savings Money mark	Ket		\$
City	ty ame of Financial Insti umber Street		ZIP Code	xxxx	Money mark Brokerage Other Checking Savings Money mark Brokerage	Ket		\$
Nui City Nai	ty ame of Financial Insti umber Street	itution	ZIP Code	XXXX	Money mark Brokerage Other Checking Savings Money mark Brokerage Other	xet	or other depository	\$
Nui City Do you securiti	ty ame of Financial Institution amber Street ty I now have, or dities, cash, or other	itution State	ZIP Code		Money mark Brokerage Other Checking Savings Money mark Brokerage Other	xet	or other depository	\$
Nui City Nai Nui City	ty ame of Financial Institution amber Street ty I now have, or dities, cash, or other	itution State	ZIP Code		Money mark Brokerage Other Checking Savings Money mark Brokerage Other	xet	or other depository	\$
Nui City City Do you securiti No	ty ame of Financial Institution amber Street ty I now have, or dities, cash, or other	State Iid you ha	ZIP Code		Money mark Brokerage Other Checking Savings Money mark Brokerage Other	xet	or other depository	\$
Nui City Do you securiti No	ty me of Financial Insti mber Street ty now have, or dities, cash, or other	State Iid you ha	ZIP Code		Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	xet		\$for
Nui City Do you securiti No	ty me of Financial Insti mber Street ty now have, or dities, cash, or other	State Iid you ha	ZIP Code	ear before you filed for bankrupt	Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	posit box (
Nui City City City Do you securiti No	ty me of Financial Insti mber Street ty now have, or dities, cash, or other	State Iid you ha	ZIP Code	ear before you filed for bankrupt	Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	posit box (Do you sti
Nui City Do you securiti No Yes	ty ame of Financial Institution ty I now have, or dities, cash, or others. Fill in the deta	State lid you ha her valua	ZIP Code	ear before you filed for bankrupt Who else had access to it?	Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	posit box (Do you sti
Nui City Do you securiti No Yes	ty me of Financial Insti mber Street ty now have, or dities, cash, or other	State lid you ha her valua	ZIP Code	ear before you filed for bankrupt	Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	posit box (Do you sti have it?
Nui City Do you securiti No Yes	ty ame of Financial Institution ty I now have, or dities, cash, or others. Fill in the deta	State lid you ha her valua	ZIP Code	ear before you filed for bankrupt Who else had access to it?	Money mark Brokerage Other Savings Money mark Brokerage Other cy, any safe dep	posit box (Do you sti have it?

City

ZIP Code

City

State

ZIP Code

State

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ve you stored property in a stor			
No Yes. Fill in the details.			
res. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you st
	The side had of had assess to it.	Dodd is die delicated	have it?
			□ No
Name of Storage Facility	Name		☐ Yes
Number Street	Number Street		
Number Street	Number Street		
	City State ZIP Code		
City State 2	ZIP Code		
9 Identify Property Yo	u Hold or Control for Someone Else		
o you hold or control any prope	rty that someone else owns? Include any proper	ty you borrowed from, are storing fo	or.
r hold in trust for someone.	ity mat democrite clos dimer include any proper	i, you sollowed hom, alo elering it	.,
🛮 No			
Yes. Fill in the details.			
	Where is the property?	Describe the property	Value
Owner's Name			\$
			· · · · · · · · · · · · · · · · · · ·
Number Street	Number Street		
Number Street	Number Street		
	City State ZIP Code		
City State 2	City State ZIP Code		
City State 2	ZIP Code Environmental Information		
City State 2	ZIP Code Environmental Information		
City State 2: 10: Give Details About Ethe purpose of Part 10, the follow	ZIP Code Environmental Information		ses of
City State 2 2 10: Give Details About Enher purpose of Part 10, the following formula in the fo	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concert wastes, or material into the air, land, soil, surface	ning pollution, contamination, release water, groundwater, or other media	
City State 2 2 10: Give Details About Enher purpose of Part 10, the following formula in the fo	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concer	ning pollution, contamination, release water, groundwater, or other media	
Give Details About Ethe purpose of Part 10, the follow Environmental law means any few azardous or toxic substances, which is the means any location, facility, site means any location, facility,	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concervastes, or material into the air, land, soil, surface controlling the cleanup of these substances, was or property as defined under any environmental	ning pollution, contamination, releas water, groundwater, or other medit stes, or material.	um,
City State 2 2 10: Give Details About Enterprise of Part 10, the follow invironmental law means any few azardous or toxic substances, which is the properties of the properti	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concervastes, or material into the air, land, soil, surface controlling the cleanup of these substances, was or property as defined under any environmental	ning pollution, contamination, releas water, groundwater, or other medit stes, or material.	um,
Give Details About Enthe purpose of Part 10, the following for the purpose of Part 10, the following for the purpose of Part 10, the following for toxic substances, which is the means any location, facility, or used to own, operate, or utility.	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concervastes, or material into the air, land, soil, surface controlling the cleanup of these substances, was or property as defined under any environmental	ning pollution, contamination, releas water, groundwater, or other medit stes, or material. law, whether you now own, operate	um, , or utilize
Give Details About Enthe purpose of Part 10, the following for the purpose of Part 10, the following for the purpose of Part 10, the following for toxic substances, which is the means any location, facility, for used to own, operate, or utilizate means anythmetrial means anythme	City State ZIP Code Environmental Information wing definitions apply: deral, state, or local statute or regulation concervastes, or material into the air, land, soil, surface controlling the cleanup of these substances, was or property as defined under any environmental ize it, including disposal sites.	ning pollution, contamination, releas water, groundwater, or other medit stes, or material. law, whether you now own, operate	um, , or utilize
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Oscar V. Sibri

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Debtor 1	Oscar V. Si	bri		Case number (if known)
	First Name	Middle Name	Last Name	

Yes. Fill in the details. Governmental unit	No			
Name of site Number Street Number Street State ZIP Code	Yes. Fill in the details.			
Number Street Number Street City State ZIP Code		Governmental unit	Environmental law, if you know it	Date of notice
Number Street Number Street Number Street City State ZIP Code				
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Oscar V. Sibri Debtor 1 Case number (if known) Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed From _____ To ____ State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☑ No ☐ Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number City ZIP Code State **Part 12:** Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☑ No ☐ Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Attachment Debtor: Oscar V. Sibri Case No:

Attachment 1

Law Offices of Manuel A. Cardenas and Associates, P.C.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In	ore Oscar V. Sibri	
		Case No
De	ebtor	Chapter 13
	DISCLOSURE OF COMPENSATION OF	F ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) named debtor(s) and that compensation paid to me within o bankruptcy, or agreed to be paid to me, for services rendere contemplation of or in connection with the bankruptcy case	ne year before the filing of the petition in d or to be rendered on behalf of the debtor(s) in
	For legal services, I have agreed to accept	\$ <u>4,000.00</u>
	Prior to the filing of this statement I have received	\$ <u>1,500.00</u>
	Balance Due	\$ <u>2,500.00</u>
2.	The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	The source of compensation to be paid to me is:	
	Debtor Other (specify)	
4.	X I have not agreed to share the above-disclosed commembers and associates of my law firm.	pensation with any other person unless they are
	I have agreed to share the above-disclosed compen members or associates of my law firm. A copy of the a people sharing in the compensation, is attached.	sation with a other person or persons who are not greement, together with a list of the names of the
5.	In return for the above-disclosed fee, I have agreed to rende case, including:	er legal service for all aspects of the bankruptcy
	 Analysis of the debtor's financial situation, and render file a petition in bankruptcy; 	ing advice to the debtor in determining whether to
	b. Preparation and filing of any petition, schedules, staten	nents of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors hearings thereof;	and confirmation hearing, and any adjourned

d.	Representation-of-the	- debtor-in-advers ar y-p r	oceedings and other	r-contested-banks	-uptcy-matters; -

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 31, 2017

s/Manuel A. Cardenas

Date

Signature of Attorney

See Attachment 1

Name of law firm

Attachment
Debtor: Oscar V. Sibri Case No:

Attachment 1

Law Offices of Manuel A. Cardenas and Associates, P.C.